

105 CMR: Department of Public Health

435.00 Appendix A

Massachusetts Department of Public Health

Application for Swimming/Wading/Special Purpose pool construction permit. Application is hereby made for a permit to (construct) (remodel) a (Public) (Semi-public Swimming) (Wading) (Special Purpose) pool.

Location: _____

Owner: _____

Contractor: _____

GENERAL INFORMATION

TYPE: _____

LENGTH: _____

WIDTH: _____

VOLUME: _____

SOURCE OF WATER: _____

PLANS SUBMITTED FOR APPROVAL: _____

SIZE: Swimming Area (Sq. Ft.) _____

Non Swimming Area (Sq.Ft.) _____

Diving Area (Sq.Ft.) _____

Maximum Pool Capacity (persons) _____

SCUM GUTTER: _____

TRIM AND FINISH: Pools walls and bottom _____

DECKING Type _____ Minimum Width _____

MECHANICAL INFORMATION _____

Filters: Kind _____

Total Filter area sq. ft.: _____

Circulation rate g.p.m.: _____

Backwash rate: g.p.m.: _____

Turn-over rate in hours: _____

Skimmers: Weir Length _____ Number _____

Chlorinator: Type _____ Capacity _____

Chemical feeders: _____ Capacity (lbs) _____ Quantity _____

Remarks: _____

PLEASE MAKE CHECK (Above-ground \$75.00, In-ground \$150.00) PAYABLE TO: TOWN OF MARION